

Fill in this information to identify the case:

Debtor	Compassionate Homecare, Inc.
United States Bankruptcy Court for the:	District of MA (State)
Case number (If known)	

Check if this is an
amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address Com of MA- Dept of Rev P.O. Box 7000 Boston, MA 02204</p> <p>Date or dates debt was incurred 01/01/2016-04/30/2016</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: \$ _____ Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: taxes</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	\$ 488024.71
2.2	<p>Priority creditor's name and mailing address</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()</p>	<p>As of the petition filing date, the claim is: \$ _____ Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	\$ _____
2.3	<p>Priority creditor's name and mailing address</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()</p>	<p>As of the petition filing date, the claim is: \$ _____ Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	\$ _____

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address Yvette Beauge 14 JFK Ave, Clinton, MA 01510	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages	\$ 616
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0026		
3.2	Nonpriority creditor's name and mailing address Kettly Beauge 232 Maple St Lynn, MA 01904	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages	\$ 784
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0027		
3.3	Nonpriority creditor's name and mailing address Giovanna Belen 25 Cargill Ave, Apt 1 Worcester, MA 01610	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages	\$ 280
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0028		
3.4	Nonpriority creditor's name and mailing address Lourdes Belliard 11 Summer St, Apt N-105 Lawrence, MA 01840	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages	\$ 392
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0029		
3.5	Nonpriority creditor's name and mailing address Nora Beltran 101 Dracut St, Apt 1 Lawrence, MA 01843	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wagess	\$ 420
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0030		
3.6	Nonpriority creditor's name and mailing address Cindy Berthiaume 282 Main Street Spencer, MA 01562	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages	\$ 1050
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0031		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Maria Betances 16 Beacon St, Apt 7 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 392
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0032		
3. Nonpriority creditor's name and mailing address Wendy Burgos 47 Acton St, Apt 1 Worcester, MA 01604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1946
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0033		
3. Nonpriority creditor's name and mailing address Rumaire Cabrera 96 Osgood St Lawrence, MA 01843	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 392
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0034		
3. Nonpriority creditor's name and mailing address Mirlene Cadet 278 Canton St Randolph, MA 02368	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 854
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0035		
3. Nonpriority creditor's name and mailing address Yatitza Caraballo 78 Warwick St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 252
Basis for the claim: _____		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0036		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
			\$ 2940
Edwin Carrasquillo PO Box 2399 Worcester, MA 01613		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred <u>2/1/16- 4/1/16</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u>0037</u>			
Lady Castano 223 Perry St, Apt 2 Lowell, MA 01852		As of the petition filing date, the claim is: Check all that apply.	\$ 392
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred <u>2/1/16- 4/1/16</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u>0038</u>			
Yuly Castro PO Box 6422 Chelsea, MA 02150		As of the petition filing date, the claim is: Check all that apply.	\$ 225
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred <u>2/1/16- 4/1/16</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u>0039</u>			
Carolyn Cepeda 90 Cluf Crossing, Apt 7 Salem, NH 03079		As of the petition filing date, the claim is: Check all that apply.	\$ 980
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred <u>2/1/16- 4/1/16</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u>0040</u>			
Maria Chaparro 17 Henry St, Apt 2 Southbridge, MA 01550		As of the petition filing date, the claim is: Check all that apply.	\$ 784
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred <u>2/1/16- 4/1/16</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u>0041</u>			
Jean Charles 36 Patterson Ave Brockton, MA 02301		As of the petition filing date, the claim is: Check all that apply.	\$ 1658
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred <u>2/1/16- 4/1/16</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u>0042</u>			

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Jennifer Corea 11 Congress Ave, Apt 201 Chelsea, MA 02150	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 252
Date or dates debt was incurred 2/1/16- 4/1/16	Basis for the claim: Wages	
Last 4 digits of account number 0043	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Angelica Cruz 550 Broadway St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 294
Date or dates debt was incurred 2/1/16- 4/1/16	Basis for the claim: Wages	
Last 4 digits of account number 0044	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Lymarie DeJesus 10 Vale St, Apt 1 Worcester, MA 01604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 784
Date or dates debt was incurred 2/1/16- 4/1/16	Basis for the claim: Wages	
Last 4 digits of account number 0045	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Ana DelRio 13 Vesper St Worcester, MA 01602	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 168
Date or dates debt was incurred 2/1/16- 4/1/16	Basis for the claim: Wages	
Last 4 digits of account number 0046	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Mirka Diaz 27 Whipple St, Apt 2 Worcester, MA 01607	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 238
Date or dates debt was incurred 2/1/16- 4/1/16	Basis for the claim: Wages	
Last 4 digits of account number 0047	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address Jennifer Diaz 80 Butler St, Apt 2 Lawrence, MA 01841	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0048</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$ 294
3.2	Nonpriority creditor's name and mailing address Ana Diaz Bonilla 8 Irene St, Apt 3 Worcester, MA 01603	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0049</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$ 280
3.3	Nonpriority creditor's name and mailing address Ramona Difo 499 Hampshire St Lawrence, MA 01841	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0050</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$ 798
3.4	Nonpriority creditor's name and mailing address Juana Difo 8 Memorial Circle, Apt 8 Andover, MA 01810	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0051</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$ 1778
3.5	Nonpriority creditor's name and mailing address Lidia Dominguez 75 Center St Methuen, MA 01844	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0052</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$ 210
3.6	Nonpriority creditor's name and mailing address Sara Escaraman 84 Sullivan Ave Lawrence, MA 01843	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u></p> <p>Last 4 digits of account number <u>0053</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$ 392

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Rosa Estrella 54 Lawrence St Lawrence, MA 01840	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 560
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0054		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Emmanual Feraud 28 Esther St Worcester, MA 01607	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 616
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0055		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Evelyn Feraud 28 Esther St Worcester, MA 01607	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 952
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0056		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Elsa Garcia 319 High St., Apt 2 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 420
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0057		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Ara Ghanaghounian 66 East Main St Southbridge, MA 01550	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 588
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0058		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	Date or dates debt was incurred	Last 4 digits of account number	Amount of claim	
				As of the petition filing date, the claim is: Check all that apply.	
3.1	Ruth Gomez Ramirez 33 Brook St, Apt 2 Lawrence, MA 01841	2/1/16- 4/1/16	0059	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1120
				Basis for the claim: Wages	
				Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Virgen Gonzalez 123 Union St Lawrence, MA 01841	2/1/16- 4/1/16	0060	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 294
				Basis for the claim: Wages	
				Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Rachael Grace 17B Gates Rd Worcester, MA 01603	2/1/16- 4/1/16	0061	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 252
				Basis for the claim: Wages	
				Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Leopoldina Graseki 1 Russell St, Apt 1 Lawrence, MA 01841	2/1/16- 4/1/16	0062	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 462
				Basis for the claim: Wages	
				Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Marie Guerrier 31 Pearl St Randolph, MA 02368	2/1/16- 4/1/16	0063	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 784
				Basis for the claim: Wages	
				Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Eulogia Guzman 15B Camden St Lawrence, MA 01841	2/1/16- 4/1/16	0064	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 343
				Basis for the claim: Wages	
				Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Solmary Guzman 95 Weare St, 2nd Fl Lawrence, MA 01843	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 1176
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0065		
3. Nonpriority creditor's name and mailing address Jose Guzman 26 Duckett Ave Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1456
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0066		
3. Nonpriority creditor's name and mailing address Nayeni Henriquez 145 Margin St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 490
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0067		
3. Nonpriority creditor's name and mailing address Isis Hernandez 95 Jamaica St Lawrence, MA 01843	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 294
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0068		
3. Nonpriority creditor's name and mailing address Joel Hernandez 283 Jackson St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 490
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0069		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	Date or dates debt was incurred	Last 4 digits of account number	As of the petition filing date, the claim is:	
				Check all that apply.	
3.1	Rafael Hidalgo 42 Sargent St Lawrence, MA 01841	2/1/16- 4/1/16	0070	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 266
3.2	Maria Hidalgo 50 Union St Methuen, MA 01844	2/1/16- 4/1/16	0071	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1092
3.3	Claribel Hiraldo 146 Woodland Ave, Apt 1 Lawrence, MA 01841	2/1/16- 4/1/16	0072	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 168
3.4	Geovanie Huertas 35 Maple St Fitchburg, MA 01840	2/1/16- 4/1/16	0073	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 336
3.5	Rafael Huertas 47 Hawley St, Apt 2R Lawrence, MA 01843	2/1/16- 4/1/16	0074	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 728
3.6	Victor Infante 9 Winslow Pl Lawrence, MA 01840	2/1/16- 4/1/16	0075	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1515

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

		Amount of claim	
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Garces Ivelices 22 Hudson Ave, Apt 2 Lawrence, MA 01841	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0076</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$ 588</u>
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Elma Jaime 11 Longwood St Methuen, MA 01844	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0077</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$ 112</u>
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Julie Jean 12 Kabler Ave Milton, MA 02186	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0078</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$ 1344</u>
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Altagracia Jiminez 23 Bodwell St Lawrence, MA 01841	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0079</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$ 336</u>
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Paula Jiminez 62 Hampshire St, Apt 3B Lawrence, MA 01841	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages</u></p> <p>Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0080</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$ 672</u>

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address Sonia Jiminez 19 Mott St Worcester, MA 01604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$ 924
			Basis for the claim: Wages
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0081		
3.2	Nonpriority creditor's name and mailing address Verlande Joslyn 860 No Montbello St, Apt 2 Brockton, MA 02301	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 560
		Basis for the claim: Wages	
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0082		
3.3	Nonpriority creditor's name and mailing address Mary Kimani 187 Fairmont St Apt 1 Fitchburg, MA 01840	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 840
		Basis for the claim: Wages	
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0083		
3.4	Nonpriority creditor's name and mailing address Sally Komba 309 Battlesfarm Dr Brockton, MA 02301	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 2310
		Basis for the claim: Wages	
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0084		
3.5	Nonpriority creditor's name and mailing address Danitza Lebron 7 Freedon Way Rd Worcester, MA 01605	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 168
		Basis for the claim: Wages	
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0085		
3.6	Nonpriority creditor's name and mailing address Nelida Leonitti 26 Linda Ave Methuen, MA 01844	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 294
		Basis for the claim: Wages	
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0086		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <input type="checkbox"/> Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ <u>672</u>
Amanda Loch 151 Bellevue St Lowell, MA 01851		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred	2/1/16- 4/1/16	
Last 4 digits of account number	0087	
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ <u>252</u>
Francisca Lopez 14 Enfield St, Apt 3 Worcester, MA 01603		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred	2/1/16- 4/1/16	
Last 4 digits of account number	0088	
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ <u>308</u>
Migdalia Lopez 20 Allen Rd Sturbridge, MA 01566		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred	2/1/16- 4/1/16	
Last 4 digits of account number	0089	
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ <u>476</u>
Lizbeth Lopez 64 McGreevey Way, Apt C Roxbury, MA 02120		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred	2/1/16- 4/1/16	
Last 4 digits of account number	0090	
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ <u>840</u>
Felix Lopez 183 Fiske St Southbridge, MA 01550		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred	2/1/16- 4/1/16	
Last 4 digits of account number	0091	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.	Nonpriority creditor's name and mailing address	Date or dates debt was incurred	Last 4 digits of account number	Amount of claim	
				As of the petition filing date, the claim is: Check all that apply.	\$
3.1	Heidy Luna 45 Grand St, Apt 104 Worcester, MA 01610	2/1/16- 4/1/16	0092	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	308
				Basis for the claim: Wages	
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Jeanne Maingrette 40 Lockingham Ave West Roxbury, MA 02132	2/1/16- 4/1/16	0093	As of the petition filing date, the claim is: Check all that apply.	2212
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
				Basis for the claim: Wages	
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Ortiz De Diaz Mariana 260 East Haverhill St, Apt 2 Lawrence, MA 01841	2/1/16- 4/1/16	0094	As of the petition filing date, the claim is: Check all that apply.	210
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
				Basis for the claim: Wages	
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Cesar Martinez 15 Bedford St Lawrence, MA 01841	2/1/16- 4/1/16	0095	As of the petition filing date, the claim is: Check all that apply.	210
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
				Basis for the claim: Wages	
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Altagracia Martinez 563 Haverhill St, Apt 2 Lawrence, MA 01841	2/1/16- 4/1/16	0096	As of the petition filing date, the claim is: Check all that apply.	588
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
				Basis for the claim: Wages	
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Argentina Martinez 24 Congress St, Apt 3 Lawrence, MA 01841	2/1/16- 4/1/16	0097	As of the petition filing date, the claim is: Check all that apply.	588
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
				Basis for the claim: Wages	
				Is the claim subject to offset?	
				<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Leandro Martinez PO Box 3139 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 1092
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>0098</u>		
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Yaitza Martinez 132 Pattison St, Apt 2 Worcester, MA 01604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1176
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>0099</u>		
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Nathatia Matador 313 Chatham West Dr Brockton, MA 02301	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 728
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>0100</u>		
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Flavia Medina 312 Water St, Apt 36 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 294
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>0101</u>		
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Karia Melendez 31 Oread St, Apt 26 Worcester, MA 01608	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1176
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>0102</u>		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim	
			<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated
	Hector Mena 618 Lowell St Lawrence, MA 01841		\$ 210	
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0103	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 392	
	Yesenia Mendez 220 High St Lawrence, MA 01841	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0104	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 280	
	Ynocencia Mercedes 30 Brook St Lawrence, MA 01841	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0105	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 294	
	Jacqueline Mercedes 45 Oakland Ave Methuen MA 01844	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0106	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 462	
	Gloribel Mercedes 28 Suffield St Apt 1 Worcester, MA 01610	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0107	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 784	
	Damarais Miguel PO Box 30212 Worcester, MA 01603	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0108	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes

Part 2: Additional Page

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		Amount of claim
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
Christine Mitchell	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 1092
95 Providence St Worcester, MA 01604	Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?
Last 4 digits of account number	0109	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
Sonia Mojica	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 616
1 Wyman St, Apt 3 Worcester, MA 01610	Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?
Last 4 digits of account number	0110	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
Milagros Montalvo	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1960
11 Glenwood St, Apt 3 Worcester, MA 01610	Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?
Last 4 digits of account number	0111	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
Nidia Montanez	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 392
268 Haverhill St Lawrence, MA 01841	Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?
Last 4 digits of account number	0112	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
Manual Morales	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 378
1 Castle St, Apt 1 Worcester, MA 01610	Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?
Last 4 digits of account number	0113	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Yasmeiri Morales 534 Haverhill St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u>
		\$ 420
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>—0114—</u>	
3.2	Nonpriority creditor's name and mailing address Dahiana Morales 2 Winthrop Ave Lawrence, MA 01843	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u>
		\$ 784
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>0115</u>	
3.3	Nonpriority creditor's name and mailing address Lillian Moreno 30 Houghton St., Apt 2 Worcester, MA 01610	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u>
		\$ 336
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>0116</u>	
3.4	Nonpriority creditor's name and mailing address Yanerys Mouliert 1 Duncannon Ave, Apt 7 Worcester, MA 01604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u>
		\$ 294
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>0117</u>	
3.5	Nonpriority creditor's name and mailing address Emma Ndolo 740 Central St Leominster, MA 01453	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u>
		\$ 420
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>0118</u>	
3.6	Nonpriority creditor's name and mailing address Francisco Nunez 311 Water St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages</u>
		\$ 392
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>0119</u>	

Part 2: Additional Page

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Amount of claim

3. Nonpriority creditor's name and mailing address Irma Oquendo 24 Arlington St, Apt 2-R Haverhill, MA 01830	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 322
Date or dates debt was incurred 2/1/16- 4/1/16	Basis for the claim: Wages	
Last 4 digits of account number 0120	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Nayare Ortega 13 Kendall St, Apt 2 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 490
Date or dates debt was incurred 2/1/16- 4/1/16	Basis for the claim: Wages	
Last 4 digits of account number 0121	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Patna Ortega 28 Woodland Ct Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 504
Date or dates debt was incurred 2/1/16- 4/1/16	Basis for the claim: Wages	
Last 4 digits of account number 0122	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Bartola Ozona 59 Reservori Dr Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 56
Date or dates debt was incurred 2/1/16- 4/1/16	Basis for the claim: Wages	
Last 4 digits of account number 0123	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Florence Paul 25 Meadow Lane, Apt 12 Bridgewater, MA 02324	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 728
Date or dates debt was incurred 2/1/16- 4/1/16	Basis for the claim: Wages	
Last 4 digits of account number 0124	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim	
			<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated
	Margarita Pena 25a Bromfield St Lawrence, MA 01841			
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0125	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 588	
	Yinette Peralta 86A Bennington St, Apt 3 Lawrence, MA 01841	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0126	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 196	
	Dianne Perez 16 Beacon St, Apt 7 Lawrence, MA 01843	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0127	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 462	
	Jose Ramon Perez 5 Saunders St Lawrence, MA 01841	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0128	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 504	
	Vitello Perez PO Box 384 Lawrence, MA 01841	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0129	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 560	
	Ysabel Perez 360 Washington St, Apt 3 Haverhill, MA 01830	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
		Basis for the claim: Wages		
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0130	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes

Debtor

Name

Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Eva Perez 73 Exeter St Lawrence, MA 01843	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 588
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0131		
3. Nonpriority creditor's name and mailing address Silangely Perez 55 Perry Ave, Apt 1 Worcester, MA 01610	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1736
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0132		
3. Nonpriority creditor's name and mailing address Lucia Pichardo 20 Mason St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 588
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0133		
3. Nonpriority creditor's name and mailing address Yolanda Polanco 23 Hampton St, Apt 1 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 588
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0134		
3. Nonpriority creditor's name and mailing address Paolo Polanco 160 Margin St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1078
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0135		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim	
			<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated
	Martin Ponce 188 Phillips St Lawrence, MA 01844			
	Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?	
	Last 4 digits of account number	0136	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 2380	
	Yesenia Portalatin 25 Michigan Rd Worcester, MA 01607	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred	2/1/16- 4/1/16	Basis for the claim: Wages	
	Last 4 digits of account number	0137	Is the claim subject to offset?	
<input checked="" type="checkbox"/>	<input type="checkbox"/> No	<input type="checkbox"/> Yes		
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 1125	
	Anabella Portillo 145 Cottage St, Apt 2 Chlesea, MA 02150	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred	2/1/16- 4/1/16	Basis for the claim: Wages	
	Last 4 digits of account number	0138	Is the claim subject to offset?	
<input checked="" type="checkbox"/>	<input type="checkbox"/> No	<input type="checkbox"/> Yes		
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 420	
	Carolina Portorreal 91 Swan St Methuen, MA 01844	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred	2/1/16- 4/1/16	Basis for the claim: Wages	
	Last 4 digits of account number	0139	Is the claim subject to offset?	
<input checked="" type="checkbox"/>	<input type="checkbox"/> No	<input type="checkbox"/> Yes		
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 1120	
	Xiomara Portorreal 91 Swan St Methuen MA 01844	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred	2/1/16- 4/1/16	Basis for the claim: Wages	
	Last 4 digits of account number	0140	Is the claim subject to offset?	
<input checked="" type="checkbox"/>	<input type="checkbox"/> No	<input type="checkbox"/> Yes		
3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 588	
	Concepcion Quinones 34 Beacon St Apt 3R Worcester, MA 01608	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred	2/1/16- 4/1/16	Basis for the claim: Wages	
	Last 4 digits of account number	0141	Is the claim subject to offset?	
<input checked="" type="checkbox"/>	<input type="checkbox"/> No	<input type="checkbox"/> Yes		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

		Amount of claim
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 2548
Emilee Quinones 34 West 6th St Lowell, MA 01850	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	
Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?
Last 4 digits of account number	0142	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 462
NancisRamirez 322 Mill St Worcester, MA 01602	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?
Last 4 digits of account number	0143	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 2464
Maria Ramirez 33 Brook St, Apt 2 Lawrence, MA 01841	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?
Last 4 digits of account number	0144	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 210
Maria Ramirez Delos Santos 143 Bennington St Lawrence, MA 01841	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?
Last 4 digits of account number	0145	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 462
Edit Ramos 6 Upland Garden Dr, Apt. 1 Worcester, MA 01607	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
Date or dates debt was incurred	2/1/16- 4/1/16	Is the claim subject to offset?
Last 4 digits of account number	0146	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
			\$ 490
Karina Ramos 58 Oread St, Apt 1 Worcester, MA 01608		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0147			
3.2 Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	\$ 784
Katherine Ramos 2 Warren St Lawrence, MA 01841		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0148			
3.3 Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	\$ 1658
Nyrrma Ramos 161 West Mountain St Worcester, MA 01610		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0149			
3.4 Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	\$ 294
Enriqueta Rivas 139 East Haverhill St Lawrence, MA 01841		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0150			
3.5 Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	\$ 210
Paola Rivera 55 Sargent St Lawrence, MA 01841		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16		Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Last 4 digits of account number 0151			
3.6 Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	\$ 252
Kassandra Rivera 56 Hollywood St, Apt 3 Worcester, MA 01609		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0152			

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Leslie Rivera 169 Lawrence St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 252
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0153		
3. Nonpriority creditor's name and mailing address Yazienette Rivera 44 Alder St, 2 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 420
Basis for the claim: <u>wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0154		
3. Nonpriority creditor's name and mailing address Lissette Rivera 72B Taralli Terr Framingham, MA 01702	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 504
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0155		
3. Nonpriority creditor's name and mailing address Janilka Rivera 52 Great Brook Valley, Apt 6 Worcester, MA 01605	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 588
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0156		
3. Nonpriority creditor's name and mailing address Luz Rivera 169 Perry Ave, Apt 1 Worcester, MA 01610	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 784
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0157		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	Date or dates debt was incurred	Last 4 digits of account number	As of the petition filing date, the claim is:		Amount of claim
				Check all that apply.		
3.1	Josephine Rivera 43 Abbott St Apt 3 Worcester, MA 01602	2/1/16- 4/1/16	0158	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Basis for the claim: Wages	\$ 882
3.2	Juana Rivera 49 Orne St, Apt 1-F Worcester, MA 01608	2/1/16- 4/1/16	0159	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Is the claim subject to offset?	
3.3	Maite Rodriguez 18 E Capitol St Methuen MA 01844	2/1/16- 4/1/16	0160	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Is the claim subject to offset?	
3.4	Francis Rodriguez 38 Sterling St Worcester, MA 01610	2/1/16- 4/1/16	0161	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Is the claim subject to offset?	
3.5	Orquidea Rodriguez 461 Prospect St Methuen MA 01844	2/1/16- 4/1/16	0162	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Is the claim subject to offset?	
3.6	Miguel Rodriguez 40 Albion St Lawrence, MA 01841	2/1/16- 4/1/16	163 002	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Is the claim subject to offset?	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Rebecca Rodriguez	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 784
	55 Alma St Lowell, MA 01854	Basis for the claim: Wages	
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0164		
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Valentina Rodriguez	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 980
	64 Arlington St Lawrence, MA 01841	Basis for the claim: Wages	
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0165		
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Amalfis Rodriguez	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1305
	Worcester, MA 01610	Basis for the claim: Wages	
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0166		
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Laura Rodriguez	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 2044
	6 Lakeside Ave, Apt 6 Worcester, MA 01603	Basis for the claim: Wages	
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0167		
3. <input type="checkbox"/>	Nonpriority creditor's name and mailing address Maria Rosario	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 210
	11 Lowell Terr, Apt 1 Lawrence, MA 01841	Basis for the claim: Wages	
	Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0168		

Debtor

Name

Case number (if known)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	Date or dates debt was incurred	Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.		Amount of claim	
				<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated		<input checked="" type="checkbox"/> Disputed
3.1	Fausto Rosario 42 Willow St Lawrence, MA 01841	2/1/16- 4/1/16	0169	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed	\$ 224
				Basis for the claim: Wages			
				Is the claim subject to offset?			
				<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes		
3.2	Isabel Rosario 21 Bowdoin St, Apt 31 Worcester, MA 01609	2/1/16- 4/1/16	0170	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed	\$ 336
				Basis for the claim: Wages			
				Is the claim subject to offset?			
				<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes		
3.3	Jose Rosario 148 Steven St, Apt 4 Lowell, MA 01851	2/1/16- 4/1/16	0171	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed	\$ 784
				Basis for the claim: Wages			
				Is the claim subject to offset?			
				<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes		
3.4	Wanda Rosario 9 Clarkson St Worcester, MA 01604	2/1/16- 4/1/16	0172	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed	\$ 840
				Basis for the claim: Wages			
				Is the claim subject to offset?			
				<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes		
3.5	Elizabeth Rosario 32 Atkinson St Lawrence, MA 01843	2/1/16- 4/1/16	0173	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed	\$ 1176
				Basis for the claim: Wages			
				Is the claim subject to offset?			
				<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes		
3.6	Michael Ruiz 15 Mount Vernon St, Apt 3 Worcester, MA 01605	2/1/16- 4/1/16	0174	<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed	\$ 1176
				Basis for the claim: Wages			
				Is the claim subject to offset?			
				<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not "fill out or submit this page.

Amount of claim

3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Louisena Sanitill	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 1008
64 Colonel Bell Dr, Apt 2 Brockton, MA 02301	Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0175		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Francis Salcedo	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 196
87 Beacon Ave Lawrence, MA 01843	Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0176		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Francisco Santiago	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 140
273 Farnham St, Apt 1 Lawrence, MA 01843	Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0177		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Juan Santiago	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 140
122 Franklin St Lawrence, MA 01841	Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0178		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Yngrid Santiago	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 560
42 Willow St Lawrence, MA 01841	Basis for the claim: Wages	
Date or dates debt was incurred 2/1/16- 4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0179		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address Kimberlie Santiago 9 Crescent Southbridge, MA 01550	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0180 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1134
3.2	Nonpriority creditor's name and mailing address Minerva Santos 9 Albion St., Apt 2 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0181 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes text here	\$ 294
3.3	Nonpriority creditor's name and mailing address Damaris Serra 25 Upland Gardens Dr, Apt 9 Worcester, MA 01607	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0182 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1596
3.4	Nonpriority creditor's name and mailing address Karla Serrano 281 Prospect St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0183 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 490
3.5	Nonpriority creditor's name and mailing address Liza Soto 160 Franklin St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0184 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 392
3.6	Nonpriority creditor's name and mailing address Michelle Soto 208 Abbott St Lawrence, MA 01843	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Wages Date or dates debt was incurred 2/1/16- 4/1/16 Last 4 digits of account number 0185 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1176

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Dora Speing 40 Montgomery Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 518
Date or dates debt was incurred Last 4 digits of account number	2/1/16- 4/1/16 0186	Basis for the claim: Wages
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3. Nonpriority creditor's name and mailing address Gladys Stocker 14 Bartlett St, Apt 1 Haverhill, MA 01830	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1120
Date or dates debt was incurred Last 4 digits of account number	2/1/16- 4/1/16 0187	Basis for the claim: Wages
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3. Nonpriority creditor's name and mailing address Rosa Susana 75 Union St, Apt 12 Methuen, MA 01844	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 294
Date or dates debt was incurred Last 4 digits of account number	2/1/16- 4/1/16 0188	Basis for the claim: Wages
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3. Nonpriority creditor's name and mailing address Romane Tanis 387 Merriam Ave Leominster, MA 01453	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 560
Date or dates debt was incurred Last 4 digits of account number	2/1/16- 4/1/16 0189	Basis for the claim: Wages
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3. Nonpriority creditor's name and mailing address Bielka Taveras 210 Prospect St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 210
Date or dates debt was incurred Last 4 digits of account number	2/1/16- 4/1/16 0190	Basis for the claim: Wages
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor

Name

Case number (if known)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	Date or dates debt was incurred	Last 4 digits of account number	Amount of claim	
				As of the petition filing date, the claim is: Check all that apply.	\$
3.1	Leidy Taveras 42 Albiam St Lawrence, MA 01841	2/1/16- 4/1/16	0191	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 350
3.2	Christopher Taveras 80 Holly St Lawrence, MA 01841	2/1/16- 4/1/16	0192	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 588
3.3	Milagros Taveras 98 Farham St Lawrence, MA 01843	2/1/16- 4/1/16	0193	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1120
3.4	Yineska Torres 55 Thetford Ave, pt 2 Dorchester, MA 02124	2/1/16- 4/1/16	0194	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 630
3.5	Maria Torres L 108 Dorchester St, Apt 1 Worcester, MA 01604	2/1/16- 4/1/16	0195	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 896
3.6	Cecelia Ulloa 46 Camden St Methuen MA 01844	2/1/16- 4/1/16	0196	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 294

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.	Nonpriority creditor's name and mailing address Juana Valdera 93 Boston St, Apt 1 Methuen MA 01844	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 294
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0197</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address Flerida Valdez 66 Riverdale St, Apt 2 Methuen MA 01844	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 490
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0198</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address Magdelena Valentin 115 Lowell St, Apt 3A Lawrence, MA 01840	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 196
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0199</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address Alcides Valentin 98 Country Club Blvd, Apt 317 Worcester, MA 01605	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 420
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0200</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address Argenis Vargas 461 Prospect St Methuen MA 01844	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 210
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred <u>2/1/16- 4/1/16</u> Last 4 digits of account number <u>0201</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Kathy Vasquez	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 245
525 Essex Street Lawrence, MA 01841	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 202		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Priscilla Vera	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1658
24 Ames Street Worcester, MA 01610	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 203		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Yanilda Webb	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$
58 Oakland Ave. Apt 4 Methuen, MA 01844	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 204		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Jahaire Webb	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 728
35 Cornish Street Lawrence, MA 01841	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 205		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Florence Gathogo	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1176
9 Sunset Ave. Methuen, MA 01844	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 209		

Debtor

Name

Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Job Gichuru P.O Box 2371 Lowell, MA 01851	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 84
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 209	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address James Githiri 157 Leyfred Terrace Springfield, MA 01108	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 308
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 210	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Martha Kahiga 20 Warner Ave. Apt. 3A Worcester, MA 01604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 588
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 212	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Dorothy Kamau 294 Greenwood St Worcester, MA 01607	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 196
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 213	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Mary Muthon 390 Salem Street Lawrence, MA 01843	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 56
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 214	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
Monica G. Kamau	<input type="checkbox"/> Contingent	\$ 196
15 Clarence Street	<input checked="" type="checkbox"/> Unliquidated	
Worcester, MA 01605	<input checked="" type="checkbox"/> Disputed	
	<input type="checkbox"/> Liquidated and neither contingent nor disputed	
	Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred	2/1/16-4/1/16	
Last 4 digits of account number	215	
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
Nancy Kamau	<input type="checkbox"/> Contingent	\$ 504
42B Pearl Street Apt. 1	<input checked="" type="checkbox"/> Unliquidated	
Lawrence, MA 01841	<input checked="" type="checkbox"/> Disputed	
	Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred	2/1/16-4/1/16	
Last 4 digits of account number	216	
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
Nancy Karuki	<input type="checkbox"/> Contingent	\$ 600
128 6th Street 1st Floor	<input checked="" type="checkbox"/> Unliquidated	
Lowell, MA 01850	<input checked="" type="checkbox"/> Disputed	
	Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred	2/1/16-4/1/16	
Last 4 digits of account number	217	
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
Margaret Kibugi	<input type="checkbox"/> Contingent	\$ 318
32 Focos Lane	<input checked="" type="checkbox"/> Unliquidated	
Ludlow, MA 01056	<input checked="" type="checkbox"/> Disputed	
	Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred	2/1/16-4/1/16	
Last 4 digits of account number	218	
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
Philomena Kiguru	<input type="checkbox"/> Contingent	\$ 840
20 Merrifield St	<input checked="" type="checkbox"/> Unliquidated	
Worcester, MA 01605	<input checked="" type="checkbox"/> Disputed	
	Basis for the claim: <u>Wages</u>	
Date or dates debt was incurred	2/1/16-4/1/16	
Last 4 digits of account number	219	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Anne Kihungi 80 Progressive Street Worcester, MA 01604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 4564
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 220		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Joyce Kinyanjui 1895 Middlesex St Apt. 6 Lowell, MA 01851	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 3136
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 221		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Hannah Kiongo 10B Sabino Farm Rd, Apt. 4 Peabody, MA 01900	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1204
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 222		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Martha Kungu 771 Norwest Dr Norwood, MA 02062	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1148
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 223		
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address Carmel Laguerre 498 Holman St Lunenburg, MA 01462	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 770
Basis for the claim: <u>Wages</u>		
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 224		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Jay Makonyonga 3108 Windsor Ridge Westborough, MA 01581	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: wages
		\$ 896
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number 0225	
3.2	Nonpriority creditor's name and mailing address Stephen Mbagu 18 Pond Street Methuen, MA 01844	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type text here
		\$ 112
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number 0226	
3.3	Nonpriority creditor's name and mailing address Beatrice Mbugua 60 Pendleton Ave Springfield, MA 01129	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim:
		\$
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number 0227	Type text here
3.4	Nonpriority creditor's name and mailing address isaac Muchiri 25 Beech Street Lowell, MA 01850	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: wages
		\$ 11680
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number 0228	
3.5	Nonpriority creditor's name and mailing address James Mugwanja 182 Mazarin St Springfield, MA 01151	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: wages
		\$ 1680
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number 0229	
3.6	Nonpriority creditor's name and mailing address Joseph Muigai 58 Cheyenne Rd Worcester, MA 01606	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim:
		\$ 1820
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number 0230	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Jedidah Muriuki 227 18th St Apt 102 Dracut, MA	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 252
Date or dates debt was incurred	Basis for the claim: wages	
2/1/16-4/1/16		
Last 4 digits of account number		
0231		
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
John Muthama 123 Lamon St Springfield, MA 01119	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 420
Date or dates debt was incurred	Basis for the claim: wages	
2/1/16-4/1/16		
Last 4 digits of account number		
0232		
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Beth Mwangi 18 Bodwell Ave. Lowell, MA 01854	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1260
Date or dates debt was incurred	Basis for the claim: wages	
2/1/16-4/1/16		
Last 4 digits of account number		
0233		
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Annie Ngugi 4 Kimball Court Apt 213 Woburn, MA 01801	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1904
Type text here		
Date or dates debt was incurred	Basis for the claim: wages	
2/1/16-4/1/16		
Last 4 digits of account number		
0234		
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
_____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
_____	Basis for the claim: _____	
Date or dates debt was incurred	Is the claim subject to offset?	
_____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	Amount of claim	
		As of the petition filing date, the claim is: Check all that apply.	\$ 1372
	James Ngugi 17 Royal Crest Drive Apt. 4 N. Andover, MA 01845	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u>Wages</u>	
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0235		
3.2	Nonpriority creditor's name and mailing address Carol Ngunjiri 11 Lilac Lane Worcester, MA 01607	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Type text here	\$ 2380
		Basis for the claim: <u>wages</u>	
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0236		
3.3	Nonpriority creditor's name and mailing address Rose Njenga 5 Hollman road Milbury, MA 01527	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 616
		Basis for the claim: <u>wages</u>	
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Type text here	
	Last 4 digits of account number 0237		
3.4	Nonpriority creditor's name and mailing address Daniel W. Njogu 9 Princeton Drive North Chelmsford, MA 01863	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 2828
		Basis for the claim: <u>wages</u>	
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0238		
3.5	Nonpriority creditor's name and mailing address Agnes Njonjo 55 Gates Avenue Springfield, MA 01118	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 2730
		Basis for the claim: <u>wages</u>	
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0239		
3.6	Nonpriority creditor's name and mailing address Joan Njoroge 7 Hazel Street Worcester, MA 01604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1316
		Basis for the claim: <u>wages</u>	
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0240		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim _____

3. Nonpriority creditor's name and mailing address Myrlande Obas 39 Hampden St Swampscott, MA 01907	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: wages	\$ 1890
Date or dates debt was incurred 2/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0241		
3. Nonpriority creditor's name and mailing address Rebecca Wakulyaka 297 Proctor Avenue Revere, MA 02145	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: wages	\$ 210
Date or dates debt was incurred 2/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0242		
3. Nonpriority creditor's name and mailing address Margaret Wambui 41 Spring Road Dracut, MA 01826	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: wages	\$ 2100
Date or dates debt was incurred 2/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0243		
3. Nonpriority creditor's name and mailing address Veronica Wanguthi 135 Armstrong Ave. Methuen, MA 01844	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type text here	\$ 1652
Date or dates debt was incurred 2/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0244		
3. Nonpriority creditor's name and mailing address Peter Waruingi 224 Pleasant Street Lowell, MA 01852	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: wages	\$ 28
Date or dates debt was incurred 2/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0245		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1 Nonpriority creditor's name and mailing address

Martin Zigwati

27 Aberdeen Rd

Springfield, MA 01109

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

Amount of claim:

\$ 3052

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0246

3.2 Nonpriority creditor's name and mailing address

Winifred Kabogoh

171 East St Bld D, Apt 343

Methuen, MA 01844

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 4902

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0247

3.3 Nonpriority creditor's name and mailing address

Catherine Carlstrom

180 Salem Road

Dracut, MA 01826

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 1360

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0248

3.4 Nonpriority creditor's name and mailing address

Hector Acevedo

80 Burt Rd

Springfield, MA 01118

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 2920

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0249

3.5 Nonpriority creditor's name and mailing address

Holly Aiken

225 Meadow St

Chicopee, MA 01013

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 595

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0250

3.6 Nonpriority creditor's name and mailing address

Oksana Anderson

303 Partridge St Gardner, MA 01440

Worcester, MA 01604

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 888

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0251

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Chilson Anzeze 97 Newfield Road Springfield, MA 01119	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 245
Date or dates debt was incurred	2/1/16-4/1/16	
Last 4 digits of account number	0252	
Basis for the claim: wages		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Marie Brazile P.O. Box 413 South Lancaster, MA 01561 Revere, MA 02145	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1771
Date or dates debt was incurred	2/1/16-4/1/16	
Last 4 digits of account number	0253	
Basis for the claim: wages		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Jennifer Campbell 54 Church Street Milton, MA 02186	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1050
Date or dates debt was incurred	2/1/16-4/1/16	
Last 4 digits of account number	0254	
Basis for the claim: wages		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Theodora Chitemere 132 Tiffany Street Springfield, MA 01108	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 3420
Type text here		
Date or dates debt was incurred	2/1/16-4/1/16	
Last 4 digits of account number	0255	
Basis for the claim: wages		
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Katrina Flamand 285 Marcy St Southbridge, MA 01550	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 40
Basis for the claim: wages		
Date or dates debt was incurred	2/1/16-4/1/16	
Last 4 digits of account number	0256	
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1 Nonpriority creditor's name and mailing address
Joycephenie Gituku

15 Corthell Rd

Billerica, MA 01821

As of the petition filing date, the claim is:
Check all that apply.

Contingent
 Unliquidated
 Disputed

Amount of claim

\$ 1260

Basis for the claim: Wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0257

3.2 Nonpriority creditor's name and mailing address
Francis Kangara

171 East St Bld D, Apt 3433 Derry Way Apt 17,
Derry, NH 03038

As of the petition filing date, the claim is:
Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 525

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0258

3.3 Nonpriority creditor's name and mailing address
Kenneth Kimani

111 Hawks Circle
Westfield, MA 01085

As of the petition filing date, the claim is:
Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 1435

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0259

3.4 Nonpriority creditor's name and mailing address
Mary Macharia

P.O. Box 4436 Springfield, MA 01101
Springfield, MA 01118

As of the petition filing date, the claim is:
Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 1190

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0260

3.5 Nonpriority creditor's name and mailing address
Mary Maina

135 Armstrong Ave.
Methuen, MA 01844

As of the petition filing date, the claim is:
Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 2205

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0261

3.6 Nonpriority creditor's name and mailing address
Symmon Maina

488 Prospect Street
Methuen, MA 01844

As of the petition filing date, the claim is:
Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 2310

Basis for the claim: wages

Date or dates debt was incurred

2/1/16-4/1/16

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0262

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Ruth Mburu	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 70
3 John Ave. Holbrook, MA 02343	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0263		
3. Nonpriority creditor's name and mailing address Catherine Nyanjui	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 85
41 Parkhurst Road Chelmsford, MA 01824	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0264		
3. Nonpriority creditor's name and mailing address Randy Obas	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 2975
89 Stoughton St. Stoughton, MA 02072	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0265		
3. Nonpriority creditor's name and mailing address Ruth Ongaro	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 152
35 New Ludlow Rd Chicopee, MA 01075	Type text here	
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 0266	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Paul Pricop	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 808.50
409 Middlesex Avenue Wilmington, MA 01887	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0267		

Debtor

Name

Case number (if known)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
		Check all that apply.	
	Jazmin Valianti 106 Glen Ave Upton, MA 01568	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 912
		Basis for the claim: Wages	
	Date or dates debt was incurred	Is the claim subject to offset?	
	2/1/16-4/1/16	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number		
	0268		
3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	Emmah Wanijru 418 Meadow Ave. Unit A Agawam, MA 01119	Check all that apply.	
		<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1116
		Type text here	
		Basis for the claim: wages	
	Date or dates debt was incurred	Is the claim subject to offset?	
	2/1/16-4/1/16	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number		
	0269		
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	Eunice Waweru 54 Bissell Ave Springfield, MA 01119	Check all that apply.	
		<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 6975
		Type text here	
		Basis for the claim: wages	
	Date or dates debt was incurred	Is the claim subject to offset?	
	2/1/16-4/1/16	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number		
	270		
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	Jose Guzman, Jr 91 Summer Street Lawrence, MA 01840	Check all that apply.	
		<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 56
		Type text here	
		Basis for the claim: wages	
	Date or dates debt was incurred	Is the claim subject to offset?	
	2/1/16-4/1/16	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number		
	0271		
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	Yannirys Abreu 27 Kingston Street N. Andover, MA 01845	Check all that apply.	
		<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 224
		Type text here	
		Basis for the claim: wages	
	Date or dates debt was incurred	Is the claim subject to offset?	
	2/1/16-4/1/16	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number		
	0272		
3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	Edwin Abreu 27 Kingston Street N Andover, MA 01845	Check all that apply.	
		<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 392
		Type text here	
		Basis for the claim: wages	
	Date or dates debt was incurred	Is the claim subject to offset?	
	2/1/16-4/1/16	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number		
	273		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Miguelina Abreu 65 Jamaica St Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 392
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 0274	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Rosa Acevedo 53 Swan Street Apt 3 Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 392
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 0275	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Leonel Acevedo 70 Brook Street Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1260
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 0276	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Maribel Alba 103 Ferry Street Lawrence, MA 01841	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 910
Type text here		
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 0277	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Carline Alfred 125 Homestead St Apt. 6 Dorchester, MA 02121	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 511
Basis for the claim: wages		
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0278		

Debtor

Name

Case number (if known)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address	Date or dates debt was incurred	Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.		Amount of claim \$ 2016
				<input type="checkbox"/> Contingent	<input checked="" type="checkbox"/> Unliquidated	
3.1	Trinidad Almonte 85 Howard St Lawrence, MA 01841	2/1/16-4/1/16	279	Basis for the claim: wages		
3.2	Rangelys Alvarez 89 Railroad St Lawrence, MA 01841	2/1/16-4/1/16	0280	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$ 1658
3.3	Aracelis Andino 133 East Haverill St Apt. 1 Lawrence, MA 01841	2/1/16-4/1/16	281	As of the petition filing date, the claim is: Check all that apply.		\$ 420
3.4	Ruben Andujar 39 Groton Street Lawrence, MA 01843	2/1/16-4/1/16	0282	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		\$ 504
3.5	Wilson Aquino 46 Bennington Street Lawrence, MA 01841	2/1/16-4/1/16	0283	Basis for the claim: wages		\$ 336
3.6	Gregoria Arias 678 Essex Street Lawrence, MA 01841	2/1/16-4/1/16	284	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$ 392

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Mayra Arias De Marte	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 1658
48 Marston St Lawrence, MA 01841	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 285		
3. Nonpriority creditor's name and mailing address Natividad Aybar	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 168
210 Chandler St Apt 3 Worcester, MA 01609	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0286		
3. Nonpriority creditor's name and mailing address Elvia Batista	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 196
478 Riverside Dr Lawrence, MA 01841	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0287		
3. Nonpriority creditor's name and mailing address Jatnna Bautista	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 126
4 Wentworth St Worcester, MA 01603	Type text here	
Date or dates debt was incurred 2/1/16-4/1/16	Basis for the claim: wages	
Last 4 digits of account number 0288	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. Nonpriority creditor's name and mailing address Beatrice Mbugua	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1512
60 Pendleton Ave Springfield, MA 01129	Basis for the claim: wages	
Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number 0289		

Part 2: Additional Page

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Amount of claim

3.	Nonpriority creditor's name and mailing address Edith Eghbalighahyazi 225 Cliff St Extension Norwich, CT 06360	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>wages</u>	\$ 2080
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 290		
3.	Nonpriority creditor's name and mailing address Wilberto Rodriguez 225 Cliff St Extension Norwich, CT 06360	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>wages</u>	\$ 52000
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0291		
3.	Nonpriority creditor's name and mailing address Lucas Hill 83 Bennington St Salem, NH	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>wages</u>	\$ 10000
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0292		
3.	Nonpriority creditor's name and mailing address Nelion Revocable Trust 10 Valley View Drive N. Grafton, MA 01536	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type text here	\$ 106498
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0293		
3.	Nonpriority creditor's name and mailing address Advanced Billing Technology 655 Boston Road, Suite 4B Billerica, MA 01821	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>comission earned</u>	\$ 1,149000
	Date or dates debt was incurred 2/1/16-4/1/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number 0294		

Part 2: Additional Page

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Amount of claim

3. Nonpriority creditor's name and mailing address Compassionate Healthcare Systems,LLC 1275 Elm Street Suite D West Springfield, MA 01089	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 778500
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: loan	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3. Nonpriority creditor's name and mailing address Helen Kiago 37 Highland Street Worcester, MA 01609	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 100000
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: loan	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3. Nonpriority creditor's name and mailing address Wanjiku Kagai 25 Emmett Way Lowell, MA 01851	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 100000
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: loan	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3. Nonpriority creditor's name and mailing address Francis Ngigi 35 Robbins Ave Unit 71 Dracut, MA 01851	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 700000
Type text here		
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: money loaned	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3. Nonpriority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ _____
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: _____	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: Additional Page

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3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim	
			<input type="checkbox"/> Contingent
Commonwealth of Massachusetts	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 34,000,000	
c/o Office of Attorney General 1 Ashburton Place Boston, MA	Basis for the claim: regulations & contract		
Date or dates debt was incurred	2013-4/2016	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Last 4 digits of account number	_____		
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 505,000	
MassHealth	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
c/o Office of Attorney General 1 Ashburton Place Boston, MA	Basis for the claim: regulations & contract		
Date or dates debt was incurred	2013-4/2016	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Last 4 digits of account number	_____		
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 698,699.51	
Department of Revenue, Com of MA P.O. Box 7000 Boston, MA 02204	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
Date or dates debt was incurred	1/1/16-4/30/16	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number	_____		
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ _____	
_____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
Date or dates debt was incurred	_____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Last 4 digits of account number	_____		
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ _____	
_____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
Date or dates debt was incurred	_____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Last 4 digits of account number	_____		

Part 2: Additional Page

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3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim				
			<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input checked="" type="checkbox"/> Disputed	<input type="checkbox"/> Liquidated and neither contingent nor disputed
Commonwealth of Massachusetts c/o Office of Attorney General 1 Ashburton Place Boston, MA	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	\$ 34,000,000				
	Basis for the claim: regulations & contract					
Date or dates debt was incurred	2013-4/2016	Is the claim subject to offset?				
Last 4 digits of account number	_____	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes			
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 505,000				
MassHealth c/o Office of Attorney General 1 Ashburton Place Boston, MA	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>					
Date or dates debt was incurred	2013-4/2016	Basis for the claim: regulations & contract				
Last 4 digits of account number	_____	Is the claim subject to offset?				
<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes					
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ 698,699.51				
Department of Revenue, Com of MA P.O. Box 7000 Boston, MA 02204	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>					
Date or dates debt was incurred	1/1/16-4/30/16	Basis for the claim: tax lien				
Last 4 digits of account number	_____	Is the claim subject to offset?				
<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes					
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ _____				
_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
Date or dates debt was incurred	_____	Basis for the claim: _____				
Last 4 digits of account number	_____	Is the claim subject to offset?				
<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes					
3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$ _____				
_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
Date or dates debt was incurred	_____	Basis for the claim: _____				
Last 4 digits of account number	_____	Is the claim subject to offset?				
<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes					